ATTACHMENT 5

INSPECTION LOG SHEETS

DAILY ENVIRONMENTAL INSPECTIONS

**ENVIRONMENTAL INSPECTION LOG
FOR THE
INCINERATOR RESIDUE DISCHARGE POINT
LOAD/UNLOAD AREAS (CHB) AND
SECONDARY CONTAINMENT SYSTEMS (OVERPACKS)**

Daily

Mark with an S any items found to be satisfactory. Mark area found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.

( ) **CHB Load/Unload Areas -** *Visually inspect for discolored and stained soil/concrete, spilled residues of hazardous waste. (Att. 5, Table 5-16)*

( ) **CHB (Overpacks) -** *Visually inspect for proper container labeling Hazardous Waste Labels, etc). (Att. 5, 5.6.2)*

( ) **CHB (Overpacks) -** *Review the CHB operating record to determine which overpacks will, or have been in storage for 7 days or more. (Att. 5, Table 5-4)*

( ) **CHB (Overpacks) -** *Ensure that the number of full overpacks in storage does not exceed 48. (Att. 5, Table 5-4)*

( ) **CHB (Overpacks) -** *Ensure that all overpacks in storage contain the same agent. (Att. 12, 12.8.2)*

NOTE: The offloading crew will control the flow of overpacks so that the overpacks will be managed on a first-in/first-out basis and that overpacks will not normally remain in the CHB for more than 24 hours prior to processing. (Att 12, 12.8.5)

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector – Print / Sign Date Time

**DAILY ENVIRONMENTAL INSPECTION
FOR 24-HOUR INTERMITTENT COLLECTION UNITS AND
MDB RCRA PERMITTED SUMPS (CATEGORY A, B AND A/B AREAS)**

Sump	Daily Results	Sump	Daily Results	Sump	Daily Results
SDS-PUMP-106		SDS-PUMP-125		SDS-PUMP-161	
SDS-PUMP-107		SDS-PUMP-126		SDS-PUMP-164	
SDS-PUMP-108		SDS-PUMP-127		SDS-PUMP-168	
SDS-PUMP-109		SDS-PUMP-134		SDS-PUMP-169	
SDS-PUMP-110		SDS-PUMP-135		SDS-PUMP-174	
SDS-PUMP-112		SDS-PUMP-145		SDS-PUMP-175	
SDS-PUMP-113		SDS-PUMP-146		SDS-PUMP-179	
SDS-PUMP-114		SDS-PUMP-147		SDS-PUMP-180	
SDS-PUMP-115		SDS-PUMP-148		SDS-PUMP-182	
SDS-PUMP-116		SDS-PUMP-149		SDS-PUMP-184	
SDS-PUMP-117		SDS-PUMP-153		SDS-PUMP-188	
SDS-PUMP-118		SDS-PUMP-154		SDS-PUMP-189	
SDS-PUMP-123		SDS-PUMP-157		SDS-PUMP-190	
SDS-PUMP-124		SDS-PUMP-160			

1. The sumps are identified by their corresponding pump numbers.

2. *Visual inspection (i.e., by viewing advisor screen located in control room) for the absence of material in sumps. Sumps identified to contain liquid will be pumped down within 24 hours from the time the liquid first began to accumulate as indicated on the level indicator (Att 5, 5.8.3).* **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign _____ Date _____ Time _____

DAILY ENVIRONMENTAL INSPECTION LOG FOR MDB RCRA PERMITTED SUMPS (CATEGORY C AREAS)

SUMP[1, 2]	RESULTS S/U	TIME
SDS-PUMP-101		
SDS-PUMP-102		
SDS-PUMP-103		
SDS-PUMP-104		
SDS-PUMP-199		
SDS-PUMP-200		

1. The sumps are identified by their corresponding pump numbers.
2. *Physical, visual inspection is required to determine the presence of material in the sumps (Att 5, Table 5-19). The contents must be pumped within 24 hours of alarm activation. When the low-level indicator is deactivated, the sump is considered absent of material (Att 5, 5.8.8).* **Mark with an S any item found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date

DAILY ENVIRONMENTAL INSPECTION LOG FOR MDB RCRA PERMITTED SUMPS (CATEGORY C AREAS)

SUMP[1, 2]	RESULTS S/U	TIME
SDS-PUMP-130		
SDS-PUMP-133		
SDS-PUMP-137		
SDS-PUMP-138		
SDS-PUMP-140		
SDS-PUMP-141		
SDS-PUMP-142		
SDS-PUMP-144		
SDS-PUMP-152[3]		
SDS-PUMP-156		
SDS-PUMP-167		
SDS-PUMP-193		
SDS-PUMP-197		

1. The sumps are identified by their corresponding pump numbers.
2. *Physical, visual inspection is required to determine the presence of material in the sumps (Att 5, Table 5-19). The contents must be pumped within 24 hours of alarm activation. When the low-level indicator is deactivated, the sump is considered absent of material (Att 5, 5.8.8).* **Mark with an S any item found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**
3. When overpacks are stored in the TMA Airlock, the Airlock may be upgraded from a Category C to a Category B area. If this occurs, the requirements specified elsewhere in the Permit for Category B RCRA permitted sumps (i.e., daily visual inspection augmented by weekly physical inspection) will be adhered to.

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date

ENVIRONMENTAL INSPECTION LOG
FOR THE
LIQUID INCINERATOR NO. 1 PRIMARY AND SECONDARY CHAMBERS

Daily

1. Mark with a ✓ whether the inspection of the Primary Chamber is being performed through the use of a Closed Circuit TV ( ), or In-Person ( ).

2. **Secondary Chamber must be performed In-Person**.

3. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Primary Chamber Agent Feed Line**
   LIC 1 *Inspect for leaks in the agent feed line at threaded and flanged pipe connections (Att 5, Table 5-11).*

   b. ( ) **Primary Chamber**
   LIC 1 *Inspect for fugitive emissions and hot spots on the outer shell of the primary chamber, which would indicate a breakdown of the chamber's refractory (Att 5, Table 5-11).*

   c. ( ) **Primary Chamber Combustion Air Blowers**
   LIC 1 *Evaluate Combustion Air Blower performance through Control Room Advisor Screen Operations (Att 5, Table 5-11).*

   d. ( ) **Primary Chamber Room Floor**
   LIC 1 *Inspect for residues of lubricant and/or wastes beneath the components of the LIC agent feed system and the LIC exhaust gas ductwork (Att 5, Table 5-11).*

   e. ( ) **Secondary Chamber SDS Feed Line**
   LIC 1 *Inspect for releases of wastes from the spent decon solution feed line at welded and flanged pipe connections (Att 5, Table 5-12).*

   f. ( ) **Secondary Chamber**
   LIC 1 *Inspect for fugitive emissions, and hot spots on the outer shell of the secondary chamber, which would indicate a breakdown of the chamber's refractory. Inspect interior of secondary chamber through view port to ensure the slag level has not reached the top of the view port (Att 5, Table 5-12).*

   g. ( ) **Secondary Chamber Combustion Air Blowers**
   LIC 1 *Inspect for loss of lubrication and vibration. Check for broken or missing anchor bolts (Att 5, Table 5-12).*

   h. ( ) **Secondary Chamber Room Floor**
   LIC 1 *Inspect for residues of lubricant and/or wastes beneath the components of the spent decon feed system and the LIC secondary chamber ductwork having a potential to cause a release of wastes or fugitive emissions (Att 5, Table 5-12).*

4. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign _____ Date _____ Time _____

ENVIRONMENTAL INSPECTION LOG
FOR THE
LIQUID INCINERATOR NO. 2 PRIMARY AND SECONDARY CHAMBERS

Daily

1. Mark with a ✓ whether the inspection of the Primary Chamber is being performed through the use of a Closed Circuit TV ( ), or In-Person ( ).

2. **Secondary Chamber must be performed In-Person**.

3. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Primary Chamber Agent Feed Line**
   LIC 2 *Inspect for leaks in the agent feed line at threaded and flanged pipe connections (Att 5, Table 5-11).*

   b. ( ) **Primary Chamber**
   LIC 2 *Inspect for fugitive emissions and hot spots on the outer shell of the primary chamber, which would indicate a breakdown of the chamber's refractory (Att 5, Table 5-11).*

   c. ( ) **Primary Chamber Combustion Air Blowers**
   LIC 2 *Evaluate Combustion Air Blower performance through Control Room Advisor Screen Operations (Att 5, Table 5-11).*

   d. ( ) **Primary Chamber Room Floor**
   LIC 2 *Inspect for residues of lubricant and/or wastes beneath the components of the LIC agent feed system and the LIC exhaust gas ductwork (Att 5, Table 5-11).*

   e. ( ) **Secondary Chamber SDS Feed Line**
   LIC 2 *Inspect for releases of wastes from the spent decon solution feed line at welded and flanged pipe connections (Att 5, Table 5-12).*

   f. ( ) **Secondary Chamber**
   LIC 2 *Inspect for fugitive emissions and hot spots on the outer shell of the secondary chamber, which would indicate a breakdown of the chamber's refractory. Inspect interior of secondary chamber through view port to ensure the slag level has not reached the top of the view port (Att 5, Table 5-12).*

   g. ( ) **Secondary Chamber Combustion Air Blowers**
   LIC 2 *Inspect for loss of lubrication and vibration. Check for broken or missing anchor bolts (Att 5, Table 5-12).*

   h. ( ) **Secondary Chamber Room Floor**
   LIC 2 *Inspect for residues of lubricant and/or wastes beneath the components of the spent decon feed system and the LIC secondary chamber ductwork having a potential to cause a release of wastes or fugitive emissions (Att 5, Table 5-12).*

4. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign _____ Date _____ Time _____

ENVIRONMENTAL INSPECTION LOG
FOR THE
DEACTIVATION FURNACE

Daily

1. Mark with a ✓ whether the inspection is being performed through the use of a Closed Circuit TV ( ), or In-Person ( ).

2. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Rotary Kiln Combustion Air Blower**
   Evaluate combustion air blower performance through Control Room Advisor screen observations (Att 5, Table 5-14).

   b. ( ) **Rotary Kiln**
   Inspect the rotary kiln for fugitive emissions (Att 5, Table 5-14).

   c. ( ) **Rotary Kiln Drive**
   Inspect the rotary kiln trunnion rollers for smooth motion (Att 5, Table 5-14).

   d. ( ) **Rotary Kiln Drive Lubrication System**
   Inspect the rotary kiln trunnion bearing lubrication system for leaks and spills (Att 5, Table 5-14).

   e. ( ) **Heated Discharge Conveyor**
   Inspect the Heated Discharge Conveyor motion indicator plate for smooth even operation (Att 5, Table 5-14).

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

**ENVIRONMENTAL INSPECTION LOG
FOR THE
DEACTIVATION FURNACE**

Daily

1. **This inspection is performed in person.**

2. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Afterburner Combustion Air Blower**
   Inspect blower for excessive noise, vibration, loss of lubricant, and missing or broken anchor bolts (Att 5, Table 5-15).

   b. ( ) **Afterburner**
   Inspect afterburner shell for hot spot, which would indicate a breakdown of refractory (Att 5, Table 5-15).

   c. ( ) **DFS Kiln Exhaust Isolation Valve (XV-862) Locks in Place and Secure**
   During normal operations, XV-862 will be locked in the open position and HV-863 will be locked in the closed position. Inspect XV-862 and HV-863 to ensure mechanical locks are in place and secure (Att 5, Table 5-15).

   d. ( ) **DFS Afterburner Intake Valve (HV-863) Locks in Place and Secure**
   During normal operations, XV-862 will be locked in the open position and HV-863 will be locked in the closed position. Inspect XV-862 and HV-863 to ensure mechanical locks are in place and secure (Att 5, Table 5-15).

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

ENVIRONMENTAL INSPECTION LOG
FOR THE
METAL PARTS FURNACE

Daily

1. This inspection is performed through the use of a Closed Circuit TV and by looking through windows from the Second Floor observation corridor. Convex mirrors are used to inspect areas not easily visible from the windows.

2. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Waste Feed System**
   Inspect for movement of internal conveyor system from the control panel by ensuring conveyor drive chains are in motion (Att 5, Table 5-13).

   b. ( ) **Combustion Air Blowers** (evaluate performance through CON Advisor indications)
   Evaluate combustion air blower performance through Control Room advisor screen observations (Att 5, Table 5-13).

   c. ( ) **Primary Chamber**
   Inspect for hot spots on the primary chamber outer shell, which indicate a breakdown of the incinerator's refractory (Att 5, Table 5-13).

   d. ( ) **Afterburner**
   Inspect afterburner shell for hot spots, which would indicate a breakdown of the afterburner's refractory (Att 5, Table 5-13).

   e. ( ) **Ductwork joining Primary Chamber and Afterburner**
   Inspect ductwork between primary chamber and afterburner for fugitive emissions (Att 5, Table 5-13).

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

**ENVIRONMENTAL INSPECTION LOG
FOR THE
POLLUTION ABATEMENT SYSTEM**

Daily - Physical

Page 1 of 2

Mark with an S any items found to be satisfactory. Mark with a U the system(s) of which incinerator's PAS are found to be unsatisfactory and describe in comments.

a. **Exhaust Gas Ductwork** - *Inspect fugitive emissions or residues at flanged duct connections and duct expansion joints. Inspect expansion joints for breaks that would result in leakage to the system (Att 5, Table 5-15).*

( ) ( ) ( ) ( )
LIC1 LIC2 MPF DFS

b. **Quench Tower and Associated Pumps/Piping** - *Inspect for brine residues at manway covers and released liquids from piping or pumps (Att 5, Table 5-15).*

( ) ( ) ( ) ( ) ( )
LIC1 LIC2 MPF DFS Piping inside PAS to BRA

c. **Venturi scrubber and Associated Pumps/Piping** - *Check venturi plug valve and ensure that it operates freely. Inspect for releases of scrubber liquid from associated pumps and piping (Att 5, Table 5-15).*

( ) ( ) ( ) ( )
LIC1 LIC2 MPF DFS

d. **Packed Bed Scrubber and Associated Pumps/Piping** - *Inspect for scrubber liquid residues at manway cover. Inspect for release of scrubber liquid from pumps and piping (Att 5, Table 5-15).*

( ) ( ) ( ) ( )
LIC1 LIC2 MPF DFS

e. **Bleed Air Damper Cover Plate** - *Ensure cover on bleed air damper is in place and secure (Att 5, Table 5-15).*

( ) ( ) ( ) ( )
LIC1 LIC2 MPF DFS

f. **Demister** – *Inspect for fugitive emissions of residues of scrubber liquid at the manway cover (Att 5, Table 5-15).*

( ) ( ) ( ) ( ) ( ) ( )
LIC1 LIC2 MPF DFS LIC MPF/DFS
Spare Spare

g. **PAS Blower** - *Inspect for excessive vibrations and loss of lubricant (Att 5, Table 5-15).*

( ) ( ) ( ) ( )
LIC1 LIC2 MPF DFS

h. **Scrubber Effluent Handling System** – *Inspect brine transfer line and associated pumps for leaks at pump seals and flanged pipe fittings. Inspect for swaying pipe system during operation (Att 5, Table 5-15).*
( ) ( ) ( ) ( )
LIC1 LIC2 MPF DFS

i. **PAS Sump 110 Less than 3 inches** - *Inspect for the presence of material and liquids in excess of three inches (3") (Att 5, Table 5-15).*
( )

j. **PAS Sump 110 no oil sheen** - *Inspect for the presence of oil sheen (Att 5, Table 5-15).*
( )

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

SYSTEM	WORK REQUEST #	EQUIPMENT	INTERIM ACTIONS OR REQUEST DESCRIPTION
COMMENTS AND OTHER INFORMATION			

Inspector Print / Sign _____ Date _____ Time _____

ENVIRONMENTAL INSPECTION LOG
FOR THE
INCINERATOR RESIDUE DISCHARGE POINTS &
LOAD/UNLOAD AREAS

Daily

1. **Mark with an S any items found to be satisfactory. Mark area found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.**

Date:_____

Area	Inspection Results (S/U)	Time	Inspector Print / Sign
RHA Load/Unload Area [1] (outside building)			
MPF Metal Residue Area [2]			
DFS Cyclone Ash Discharge Area [3]			
DFS Heated Discharge Conveyor Discharge Area [4]			

[1] *Visually inspect for discolored and stained soil/concrete and residues of hazardous waste (Att 5, Table 5-16).*
[2] *Inspect for ash residues on concrete base underneath conveyor system (Att 5, Table 5-16).*
[3] *Inspect for ash residue around receiving container. Ensure that the container is labeled as hazardous waste and that there is sufficient space in the container to receive ash that will be generated during operational period (Att 5, Table 5-16).*
[4] *Inspect for ash residue around receiving container. Ensure that the container is labeled as hazardous waste and that there is sufficient space in the container to receive ash that will be generated during operational period (Att 5, Table 5-16).*

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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ACAMS DAILY OPERATIONAL LOG

SEE TE-LOP-524

This page is only used for reference to remind inspectors of the daily requirement.

ACAMS CALIBRATION DATA SHEET

SEE TE-LOP-524

This page is only used for reference to remind inspectors of the daily requirement.

ENVIRONMENTAL INSPECTION LOG
FOR THE PROJECTILE/MORTAR DISASSEMBLY MACHINE
PERFORMED BY CONTROL ROOM OPERATOR

Daily

1. **Mark with an S any items found to be satisfactory. Mark items found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Projectile/Mortar Disassembly Machines (to include Burster Size Reduction Machine)**
   Observe the operation of the machines. Note the number of times each machine has to be put into manual mode because an interlock on the machine prevented further processing (in order to evaluate any deterioration in the machine's performance) (Att 5, Table 5-20).

   b. ( ) **Waste Feed System** => ( ) ECR A ( ) ECR B
   Inspect the Projectile Demilitarization Machine within ECR A and ECR B to ensure that no explosive residues or explosive munition components are collecting on the associated material handling equipment. Inspect for leaking hydraulic hoses/connections and accumulated residues of chemical agent (Att 5, Table 5-14).

Demil Machine ID	No. of Rejects	No. Unplanned Stops	Demil Machine ID	No. of Rejects	No. Unplanned Stops
Reserved			MMS-BDS-101	N/A	N/A
Reserved			MMS-BDS-102	N/A	N/A
PHS-PMD-101			PHS-MDM-101	N/A	N/A
PHS-PMD-102			PHS-MDM-102	N/A	N/A
Reserved			PHS-MDM-103	N/A	N/A

   c. **Munition Load/Unload Components**
   Visually inspect for munitions and/or munitions components not being transferred by conveyors due to hung up or falling on the floor. Ensure that all containers are able to be moved by the material handling system (Att 5, Table 5-20).

   ( ) Projectile Tilting Conveyor(s)
   ( ) Multiposition Loader(s)

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

Reserved

ENVIRONMENTAL INSPECTION LOG
FOR THE BULK CONTAINER DEMILITARIZATION MACHINES
PERFORMED DAILY BY CONTROL ROOM OPERATOR

Daily

1. **Mark with an S any items found to be satisfactory. Mark items found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Bulk Drain Machine**
   Observe the operation of the machines. Note the number of times each machine has to be put into manual mode because and interlock on the machine prevented further processing (in order to evaluate any deterioration in the machine's performance) (Att 5, Table 5-20).

Demil Machine ID	No. of Rejects	No. Unplanned Stops	Demil Machine ID	No. of Rejects	No. Unplanned Stops
Reserved			MMS-BDS-101	N/A	
Reserved			MMS-BDS-102	N/A	
PHS-PMD-101	N/A	N/A	PHS-MDM-101	N/A	N/A
PHS-PMD-102	N/A	N/A	PHS-MDM-102	N/A	N/A
Reserved			PHS-MDM-103	N/A	N/A

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

ENVIRONMENTAL INSPECTION LOG
FOR THE MULTIPURPOSE DEMILITARIZATION MACHINE
PERFORMED DAILY BY CONTROL ROOM OPERATOR

Daily

1. **Mark with an S any items found to be satisfactory. Mark items found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Multipurpose Demilitarization Machines**
   Observe the operation of the machines. Note the number of times each machine has to be put into manual mode because an interlock on the machine prevented further processing (in order to evaluate any deterioration in the machine's performance) (Att 5, Table 5-20).

Demil Machine ID	No. of Rejects	No. Unplanned Stops	Demil Machine ID	No. of Rejects	No. Unplanned Stops
Reserved			MMS-BDS-101	N/A	N/A
Reserved			MMS-BDS-102	N/A	N/A
PHS-PMD-101	N/A	N/A	PHS-MDM-101		
PHS-PMD-102	N/A	N/A	PHS-MDM-102		
Reserved			PHS-MDM-103		

   b. **Munitions load/unload components**
   Visually inspect for munitions and/or munitions components not being transferred by conveyors due to hung up or falling on the floor. Ensure that all containers are able to be moved by material handling system. Record the number of rejects in the Munitions Processing Bay (Att 5, Table 5-20).

   ( ) Pick and Place Machine(s)

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

ENVIRONMENTAL INSPECTION LOG
FOR THE TRAY SYSTEM
PERFORMED DAILY BY CONTROL ROOM OPERATOR

Daily

1. **Mark with an S any items found to be satisfactory. Mark items found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.**

   a. **Material Handling Conveyor Systems**
   Visually inspect for munitions and/or munitions components not being transferred by conveyors due to hung up or falling on the floor. Ensure that all containers are able to be moved by material handling system (Att 5, Table 5-20).

   ( ) Explosive Containment Vestibule
   ( ) Explosive Containment Room 101
   ( ) Explosive Containment Room 102
   ( ) By Pass Conveyor Line A
   ( ) By Pass Conveyor Line B
   ( ) Buffer Storage Area (supporting Munitions Processing Bay)
   ( ) Munitions Corridor
   ( ) Munitions Processing Bay
   ( ) Buffer Storage Area (supporting MPF)

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions with the above inspection criteria.**

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Inspector Print / Sign Date Time

ENVIRONMENTAL INSPECTION LOG
FOR THE
SPENT DECON SYSTEM (SDS)

Daily – Inside Toxic Area

1. Mark with a ✓ whether inspection is being performed through the use of: Closed Circuit TV ( ), or In-Person ( ).

2. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. **Level Indicators and Transmitters** - *Check level indicator transmitters for proper operation at control panel (Att 5, Table 5-22).*
   ( ) SDS-101 ( ) SDS-102 ( ) SDS-103

   b. **Tank Structure** - *Visually inspect for major corroded areas, discolored, or blistered surface coating, buckles or bulges in tank, corrosion around foundation, and evidence of overtopping (Att 5, Table 5-22).*
   ( ) SDS-101 ( ) SDS-102 ( ) SDS-103

   c. **Tank Area** - *Visually inspect for evidence of waste residue on floor (Att 5, Table 5-22).*
   ( ) SDS-101 ( ) SDS-102 ( ) SDS-103

   d. **Tank Supports** - *Visually inspect for discolored or blistered surface coating and corroded areas (Att 5, Table 5-22).*
   ( ) SDS-101 ( ) SDS-102 ( ) SDS-103

   e. **Pipe System, Valves and Pumps** - *Inspect for leaks, vibration or swaying of pipe systems, missing pump anchor bolts (Att 5, Table 5-22).*
   ( ) SDS-101 ( ) SDS-102 ( ) SDS-103

   f. **Secondary Containment (SDS-PUMP-150 presence of liquid – daily)** - *Visually inspect for the presence of liquid in secondary containment sump by observing the status of sump's liquid level indicator (Att 5, Table 5-22).*
   ( ) SDS-101 ( ) SDS-102 ( ) SDS-103

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

ENVIRONMENTAL INSPECTION LOG
FOR THE
TOXIC CUBICLE TANK

Daily

1. Mark with a ✓ whether inspection is being performed through the use of: Closed Circuit TV ( ), or In-Person ( ).

2. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. **Level Indicators and Transmitters** - *Check level indicator transmitters for proper operation at control panel (Att 5, Table 5-21).*
   ( ) ( )
   ACS-101 ACS-102

   b. **Tank Structure** - *Visually inspect for major corroded areas, discolored, or blistered surface coating, buckles or bulges in tank, corrosion around foundation, and evidence of overtopping (Att 5, Table 5-21).*
   ( ) ( )
   ACS-101 ACS-102

   c. **Tank Area** - *Visually inspect for evidence of waste residue on floor (Att 5, Table 5-21).*
   ( ) ( )
   ACS-101 ACS-102

   d. **Tank Supports** - *Visually inspect for discolored or blistered surface coating and corroded areas (Att 5, Table 5-21).*
   ( ) ( )
   ACS-101 ACS-102

   e. **Pipe System, Valves and Pumps** - *Visually inspect for leaks, vibration or swaying of pipe systems, missing pump anchor bolts (Att 5, Table 5-21).*
   ( ) ( )
   ACS-101 ACS-102

   f. **Secondary Containment (SDS-PUMP-151 presence of liquid – daily)** - *Visually inspect for the presence of liquid in secondary containment sump by observing the status of sump's liquid level indicator (Att 5, Table 5-21).*
   ( ) ( )
   ACS-101 ACS-102

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign _____ Date _____ Time _____

ENVIRONMENTAL INSPECTION LOG
FOR THE
BRINE REDUCTION AREA SURGE TANKS

Daily

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. **Level Indicators and Transmitters** - *Check level indicator and transmitter for proper operation at the tank (Att 5, Table 5-23).*

   ( ) BRA-101 ( ) BRA-102 ( ) BRA-201 ( ) BRA-202

   b. **Tank Structure** - *Visually inspect for major corroded areas, bulging or buckles in tank, waste, waste residue stains on the sides of tanks and evidence of overtopping (Att 5, Table 5-23).*

   ( ) BRA-101 ( ) BRA-102 ( ) BRA-201 ( ) BRA-202

   c. **Pipe Systems, Valves and Pumps** - *Visually inspect for leaks, vibration or swaying of operating pipe systems, missing pump anchor bolts, leaking pump seals. (Att 5, Table 5-23).*

   ( ) BRA-101 ( ) BRA-102 ( ) BRA-201 ( ) BRA-202 ( ) Brine Loading Station ( ) PAS to BRA Tank

   d. **Secondary Containment (presence of liquid)*** - *Visually inspect for presence of liquids in secondary containment system and associated sump (Att 5, Table 5-23) .Snow, ice and liquid shall be removed within 24 hours of the end of the precipitation event (IV.H.2).*

   ( ) Brine Storage Tank Berm ( ) Sump 103 ( ) Brine Loading Station ( ) Sump 107

   e. **Secondary Containment (system integrity)** - *Ensure that there are no cracks or gaps in the coating used to seal the secondary containment berms, floor, and sump (Att 5, Table 5-23). Snow, ice and liquid shall be removed within 24 hours of the end of the precipitation event (IV.H.2).*

   ( ) Brine Storage Tank Berm ( ) Sump 103 ( ) Brine Loading Station ( ) Sump 107

   * Liquid may be present in the secondary containment sump from October 15 to April 15. The presence of water is necessary to ensure the proper operation of the heater located in the sump.

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

ENVIRONMENTAL INSPECTION LOG
FOR THE
MUNITIONS DEMILITARIZATION BUILDING
VENTILATION CARBON FILTER SYSTEM
PERFORMED BY THE CONTROL ROOM OPERATOR
Daily

1. **Record the value of all pressure differential and flow rate readings, satisfactory and unsatisfactory for all filter units. For on-line filter units, mark with an S any pressure differentials and flow rates found to be satisfactory or otherwise mark with a U. For off-line filter units spooled to the vestibule mark with an S for the absence of an ACAMS reading in the vestibule. For off-line filter units spooled that show an ACAMS reading in the vestibule, unless the alarm occurs during HVAC filter maintenance activities, mark with a U. For "Spooled to Vestibule" and "ACAMS at Midbed in Alarm" columns circle Yes or No as appropriate.**

Filter Unit	Spooled to Vestibule?	ACAMS at Midbeds in Alarm[1]		Overall Filter Unit Pressure Differential[2] (" WC)	Filter Unit Blower[3] (KCFM)
		2nd	3rd		
Filter 101 ( )	Yes/No	Yes/No	Yes/No		
Filter 102 ( )	Yes/No	Yes/No	Yes/No		
Filter 103 ( )	Yes/No	Yes/No	Yes/No		
Filter 104 ( )	Yes/No	Yes/No	Yes/No		
Filter 105 ( )	Yes/No	Yes/No	Yes/No		
Filter 106 ( )	Yes/No	Yes/No	Yes/No		
Filter 107 ( )	Yes/No	Yes/No	Yes/No		
Filter 108 ( )	Yes/No	Yes/No	Yes/No		
Filter 109 ( )	Yes/No	Yes/No	Yes/No		

[1] The ACAMS alarm at the levels specified in the Agent Monitoring Plan. Monitoring information is observed to verify that no agent breakthrough for the 2nd and 3rd carbon banks has occurred. Breakthrough is defined as any confirmed reading equal to or greater than 3 VSL for GB or VX, or 3 VSL for HD. *("No" will be circled when ACAMS monitoring is discontinued as described in the Agent Monitoring Plan) (Att 5, Table 5-26)*

[2] Record value and verify that differential pressure did not exceed 14" w.c. (*to determine if plugging of any carbon filter bank has occurred*) *(Att 5, Table 5-26).*

[3] Record value and verify an inlet flow greater than or equal to 12,200 CFM (*to determine if blower performance has deteriorated*) *(Att 5, Table 5-26).*

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

WEEKLY ENVIRONMENTAL INSPECTIONS

ENVIRONMENTAL INSPECTION LOG FOR THE CONTAINER HANDLING BUILDING (CHB) & SECONDARYCONTAINMENT SYSTEMS (Overpacks)

SECTION 1 (To be filled out daily and turned in weekly - Physical) **Week Ending _____(Sunday)**

Overpack(s) in storage more than 7 days will be monitored on day seven and every seventh day thereafter (list by overpack number). Record weekly monitoring results of overpacks listed (agent detected = +, agent not detected = -) *(Att 5, Table 5-4).*

	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY	
	Overpack Number	Monitoring Results	Overpack Number	Monitoring Results	Overpack Number	Monitoring Results	Overpack Number	Monitoring Results	Overpack Number	Monitoring Results	Overpack Number	Monitoring Results	Overpack Number	Monitoring Results
# of ONCs														
Initials														
Date														

Note: Overpacks with positive readings require priority processing.

Number of overpacks in storage (maximum = 48) *(Att 5, Table 5-4).*

Inspector Print / Sign:_____ Date:_____ Time: _____

ENVIRONMENTAL INSPECTION LOG
FOR THE
CONTAINER HANDLING BUILDING
& SECONDARY CONTAINMENT SYSTEMS

Weekly - Physical

SECTION 2

a. **Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.**

i. ( ) **Overpack (ONC) Annual Integrity Test** – *ONCs are subject to an integrity test to determine their ability to contain agent vapors prior to being placed into service and on an annual basis thereafter. Verify annual test has been accomplished by viewing the stenciled date due on the ONC (i.e. 10/04 (in 4" letters)). (Att 5, Table 5-4).*

ii. ( ) **Overpack label** - *Inspect all overpacks in storage to ensure they are correctly labeled (Att 5, Table 5-4).*

iii. ( ) **Material Handling Equipment** - *Observe material handling equipment during operation to determine any loss of performance (Att 5, Table 5-4).*

iv. ( ) **Storage Base (Floor, trenches, sumps)** - *floors, trenches and sumps for cracks, gaps in the concrete or concrete coating (Att 5, Table 5-4).*

v. ( ) **General Area** - *Inspect the ONC storage area for apparent spills or leaks from overpacks (Att 5, Table 5-4).*

NOTE: *CHB personnel will control the flow of overpacks to be managed on a first-in/first-out basis and that they will not normally remain in the CHB for greater than 24 hours prior to processing (Att 12, 12.8.5).*

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

ENVIRONMENTAL INSPECTION LOG
FOR
TMA "C" AIRLOCK

Weekly - Visual

(when an overpack is in storage):

a. **Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe any unsatisfactory conditions in comments.** *Inspection to be performed by visual inspection through the observation corridor window (Att 5, Table 5-1).*

i. ( ) **Containers in Storage (maximum number of overpacks allowed = 1)**

ii. ( ) **Container Labels** - *Inspect overpack in storage to ensure it is correctly labeled (Att 5, Table 5-6).*

iii. ( ) **Material Handling Equipment** - *Observe material handling equipment during operation to determine any loss of performance (Att 5, Table 5-6).*

iv. ( ) **Storage Base (floor, sumps)** - *Inspect floors, trenches and sumps for cracks, gaps in the concrete or concrete coating (Att 5, Table 5-6).*

v. ( ) **General Area** - *Inspect the ONC storage area for apparent spills or leaks from the overpack (Att 5, Table 5-6).*

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

ENVIRONMENTAL INSPECTION LOG
FOR
TMA DECON A/B AREA

Weekly - Visual

(when an overpack is in storage):

a. **Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe any unsatisfactory conditions in comments.** *Inspection to be performed by visual inspection (e.g., CCTV) (Att 5, Table 5-1).*

i. ( ) **Containers in Storage (maximum number of overpacks allowed = 1)**

ii. ( ) **Container Labels** - *Inspect overpack in storage to ensure it is correctly labeled (Att 5, Table 5-6).*

iii. ( ) **Material Handling Equipment** - *Observe material handling equipment during operation to determine any loss of performance (Att 5, Table 5-6).*

iv. ( ) **Storage Base (floor, sumps)** - *Inspect floors, trenches and sumps for cracks, gaps in the concrete or concrete coating (Att 5, Table 5-6).*

v. ( ) **General Area** - *Inspect the ONC storage area for apparent spills or leaks from the overpack. (Att 5, Table 5-6).*

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign	Date	Time

ENVIRONMENTAL INSPECTION LOG
FOR
TMA CONTAINER STORAGE

Weekly - Physical

a. **Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.**

i. ( ) **Volume of Containers in Storage** - *maximum allowed = 2,200 gallons (Att 5, Table 5-5).*

ii. ( ) **Container Labels** - *Inspect all containers in storage to ensure they are correctly labeled (Att 5, Table 5-5).*

iii. ( ) **Material Handling Equipment** - *Observe material handling equipment during operation to determine any loss of performance (Att 5, Table 5-5).*

iv. ( ) **Integrity of Containers** – *Inspect the containers for deterioration (i.e., rupture, corrosion, released material, etc.) (Att 5, Table 5-5).*

v. ( ) **Storage Base (floor, sumps)** - *Inspect the floor and sumps for cracks and gaps in the concrete or the concrete coating (Att 5, Table 5-5).*

vi. ( ) **General Area** - *Inspect the TMA area for apparent spills or leaks from the containers (Att 5, Table 5-5).*

vii. ( ) **Closed Containers** – *Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container (Att 5, Table 5-5).*

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

**WEEKLY ENVIRONMENTAL INSPECTION LOG
FOR 24-HOUR INTERMITTENT COLLECTION UNITS
AND MDB RCRA PERMITTED SUMPS
(CATEGORY A, B, AND A/B AREAS)**

Weekly - Physical

Week Ending:_____

Page 1 of 2

Location	Sump	Result (S or U)	Inspector Print and Sign	Date	Time
LIC A/B Airlock	SDS-PUMP-180				
DFS B Airlock	SDS-PUMP-161				
111 B Airlock	SDS-PUMP-160				
111 A Airlock	SDS-PUMP-134				
LMC	SDS-PUMP-179				
LMC	SDS-PUMP-184				
LBSA	SDS-PUMP-164				
LBSA	SDS-PUMP-190				
123 B Airlock	SDS-PUMP-182				
123 A Airlock	SDS-PUMP-125				
TMA A Area	SDS-PUMP-135				
TMA A Area	SDS-PUMP-154				
TMA A/B Area	SDS-PUMP-153				
255 B Airlock	SDS-PUMP-123				
255 A Airlock	SDS-PUMP-124				
UMC	SDS-PUMP-112				
UMC	SDS-PUMP-113				
UMC	SDS-PUMP-114				
UMC	SDS-PUMP-115				
UMC	SDS-PUMP-116				
UMC	SDS-PUMP-117				
UMC	SDS-PUMP-118				
UMC	SDS-PUMP-169				
UMC	SDS-PUMP-174				
UMC	SDS-PUMP-189				
ECV	SDS-PUMP-108				
ECV	SDS-PUMP-109				
ECV	SDS-PUMP-110				
ECR A	SDS-PUMP-107				
ECR B	SDS-PUMP-106				
MPB	SDS-PUMP-145				

INSPECTION CONTINUED ON NEXT PAGE

Page 2 of 2

Location	**Sump**	**Result (S or U)**	**Inspector Print and Sign**	**Date**	**Time**
MPB	SDS-PUMP-146				
MPB	SDS-PUMP-147				
MPB	SDS-PUMP-148				
MPB	SDS-PUMP-149				
MPB	SDS-PUMP-168				
MPB	SDS-PUMP-175				
265 A Airlock	SDS-PUMP-126				
265 B Airlock	SDS-PUMP-127				

1. Inspection will be performed by removing the grating and with a flashlight, inspect for cracks, chips and deterioration of protective coatings, rusting and any signs of leaks *(Att 5, Table 5-18 and DSHW letter dated 07 May 2004).* **If the inspection cannot be performed due to residues in the sump, the residues must be removed to complete the inspection.**
2. Physical visual inspection to determine if the liquid level in the sump corresponds with the alarm displayed on the advisor screen in the control room *(Att 5, Table 5-18).* **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions below.**

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions in accordance with the above inspection criteria.**

RESERVED

ACAMS CALIBRATION DATA SHEET

SEE TE-LOP-524

This page is only used for reference to remind inspectors of the weekly requirement.

ENVIRONMENTAL INSPECTION LOG
FOR THE
SPENT DECON SYSTEM (SDS) ROOM

Weekly - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

a. **Level Indicators and Transmitters** – *Check level indicator transmitters for proper operation (Att 5, Table 5-22).*

( ) SDS-101 ( ) SDS-102 ( ) SDS-103

b. **Tank Structure** – *Visually inspect for major corroded areas, discolored, or blistered surface coating, buckles or bulges in tank, corrosion around foundation, and evidence of overtopping (Att 5, Table 5-22).*

( ) SDS-101 ( ) SDS-102 ( ) SDS-103

c. **Tank Area** – *Visually inspect for evidence of waste residue on floor (Att 5, Table 5-22).*

( ) SDS-101 ( ) SDS-102 ( ) SDS-103

d. **Tank Supports** – *Inspect for discolored or blistered surface coating and corroded areas (Att 5, Table 5-22).*

( ) SDS-101 ( ) SDS-102 ( ) SDS-103

e. **Pipe System, Valves and Pumps** – *Inspect for leaks, vibration or swaying of pipe systems, missing pump anchor bolts (Att 5, Table 5-22).*

( ) SDS-101 ( ) SDS-102 ( ) SDS-103

f. **Secondary Containment (SDS-PUMP-150 presence of liquid – weekly)** – *Visually inspect for the presence of liquid in secondary containment sump (Att 5, Table 5-22).*

( ) SDS-101 ( ) SDS-102 ( ) SDS-103

g. **Secondary Containment (system integrity – weekly)** – *Inspect for cracks, gaps and deterioration of protective coating of secondary containment system and floor (Att 5, Table 5-22).*

( ) SDS-101 ( ) SDS-102 ( ) SDS-103

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign _____ Date _____ Time _____

ENVIRONMENTAL INSPECTION LOG
FOR THE
TOXIC CUBICLE TANK

Weekly - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. **Level Indicators and Transmitters** - *Check level indicator transmitters for proper operation (Att 5, Table 5-21).*
   ( ) ACS-101 ( ) ACS-102

   b. **Tank Structure** - *Visually inspect for major corroded areas, discolored, or blistered surface coating, buckles or bulges in tank, corrosion around foundation, and evidence of overtopping (Att 5, Table 5-21).*
   ( ) ACS-101 ( ) ACS-102

   c. **Tank Area** - *Visually inspect for evidence of waste residue on floor (Att 5, Table 5-21).*
   ( ) ACS-101 ( ) ACS-102

   d. **Tank Supports** - *Visually inspect for discolored or blistered surface coating and corroded areas (Att 5, Table 5-21).*
   ( ) ACS-101 ( ) ACS-102

   e. **Pipe System, Valves and Pumps** - *Visually inspect for leaks, vibration or swaying of pipe systems, missing pump anchor bolts (Att 5, Table 5-21).*
   ( ) ACS-101 ( ) ACS-102

   f. **Secondary Containment (SDS-PUMP-151 presence of liquid)** - *Visually inspect for the presence of liquid in secondary containment sump (Att 5, Table 5-21).*
   ( ) ACS-101 ( ) ACS-102

   g. **Secondary Containment (system integrity)** - *Inspect for cracks, gaps and deterioration of protective coating of secondary containment system and floor (Att 5, Table 5-21).*
   ( ) ACS-101 ( ) ACS-102

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

ENVIRONMENTAL INSPECTION LOG
FOR THE
S-2 WAREHOUSE CONTAINER STORAGE AREA &
SECONDARY CONTAINMENT SYSTEMS

Weekly - Physical

a. **Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.**

i. ( ) **Volume of containers in storage** *(maximum allowed = 38,720 gallons) (Att 5, Table 5-10).*

ii. ( ) **Volume of containers per secondary containment pallet** *(maximum allowed = 600 gallons per secondary containment pallet) (Att 5, Table 5-10).*

iii. ( ) **Volume of largest container stored on a secondary containment pallet** *(maximum allowed = 60 gallons) (Att 5, Table 5-10).*

Note: Attachment 12 describes certain circumstances where a larger container could be stored.

iv. ( ) **Segregation of Incompatible Wastes** *(i.e., only one type of site-generated wastes to be placed in a secondary containment pallet at one time) (Att 5, Table 5-10).*

v. ( ) **Container Labels** - *Inspect all containers in storage to ensure they are correctly labeled (Att 5, Table 5-10).*

vi. ( ) **Material Handling Equipment** - *Observe material handling equipment during operation to determine any loss of performance (Att 5, Table 5-10).*

vii. ( ) **Integrity of Containers** *(i.e., absence of deterioration, corrosion, released material, etc.) (Att 5, Table 5-10).*

viii. ( ) **Integrity of Secondary Containment Pallets** *(i.e., absence of deterioration, corrosion, released material, etc.) (Att 5, Table 5-10).*

ix. ( ) **General Area** - *Inspect area for apparent spills or leaks from the containers or secondary containment pallets (Att 5, Table 5-10).*

x. ( ) **Closed Containers** - *Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container (Att 5, Table 5-10).*

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

ENVIRONMENTAL INSPECTION LOG
FOR THE UNPACK AREA (UPA) CONTAINER STORAGE AREA

SECTION 1 (To be filled out daily and turned in weekly - Physical) **Week Ending _____(Sunday)**

Overpack(s) in storage more than 7 days will be monitored on day seven and every seventh day thereafter (list by overpack number). Record weekly monitoring results of overpacks listed (agent detected = +, agent not detected =)

	MONDAY		TUESDAY		WEDNESDAYY		THURSDAY		FRIDAY		SATURDAY		SUNDAY	
	Overpack Number	Monitoring Results	Overpack Number	Monitoring Results	Overpack Number	Monitoring Results	Overpack Number	Monitoring Results	Overpack Number	Monitoring Results	Overpack Number	Monitoring Results	Overpack Number	Monitoring Results
# of ONCs														
Initials														
Date														

Note: Onsite Container (ONC) is used interchangeably with Overpack for UPA operations.
Overpacks with positive readings require priority processing.

Number of overpacks in storage (maximum allowed = 9 ONCs)

Inspector Print / Sign:_____ Date:_____ Time:_____

ENVIRONMENTAL INSPECTION LOG
FOR THE UPA CONTAINER STORAGE AREA

Weekly - Physical

SECTION 2

a. **Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.**

i. ( ) **Overpack Label** - *Inspect all overpacks in storage to ensure they are correctly labeled (Att 5, Table 5-7).*

ii. ( ) **Material Handling Equipment** - *Observe material handling equipment during operation to determine any loss of performance (Att 5, Table 5-7).*

iii. ( ) **Storage Base** - *Inspect floors, trenches and sumps for cracks, gaps in the concrete or the concrete coating (when using the UPA for storage of leaking containers) (Att 5, Table 5-7).*

iv. ( ) **Closed Containers** - *Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container (Att 5, Table 5-7).*

v. ( ) **General Area** - *Inspect the storage area for apparent spills or leaks from the overpacks/containers (Att 5, Table 5-7).*

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

ENVIRONMENTAL INSPECTION LOG
FOR THE UPA CONTAINER STORAGE AREA
(ONLY APPLICABLE WHEN SECONDARY CONTAINMENT PALLETS ARE USED)

Weekly - Physical

a. **Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.**
*(**NOTE**: While stored in the UPA, munitions & bulk containers will be placed on secondary containment pallets or kept in the overpacks which will provide the secondary containment).*

i. ( ) Ensure the total number of overpacks and secondary containment pallets used to store containers does not exceed the limits specified below: *(Att 12, Table 12-1)*

Munitions Stored	Maximum Number of Overpacks and Secondary Containment Pallets Allowed	Number of Overpacks and Secondary Containment Pallets in Storage
Munitions or Combination of Munitions	9	

ii. ( ) Ensure the number of containers stored per secondary containment pallet does not exceed the quantities specified below *(Att 12, 12.10.7 through 12.10.10).*

Munition	Maximum Number Per Pallet	Number of Munitions on Each Pallet
155 mm projectile	96	
Ton container	2	
4.2” mortar	192	

iii. ( ) Ensure that the munition(s) or pallet(s) of munitions do not extend over the edge of the secondary containment pallet *(Att 5, Table 5-7(a)).*

iv. ( ) **Integrity of Containers** *(i.e., absence of deterioration, rupture, corrosion, released material, etc.) (Att 5, Table 5-7(a)).*

v. ( ) **Integrity of Secondary Containment Pallets** *(i.e., absence of deterioration, rupture, corrosion, released material, etc.) (Att 5, Table 5-7(a)).*

vi. ( ) **General Area** - *Inspect the storage area for apparent spills or leaks from the containers or secondary containment pallets (Att 5, Table 5-7(a)).*

vii. ( ) **Closed Containers** - *Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container (Att 5, Table 5-7(a)).*

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

ENVIRONMENTAL INSPECTION LOG
FOR THE
ECV CONTAINER STORAGE AREA

Weekly - Physical

1. **Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.** *Inspection to be performed by visual inspection (e.g., CCTV, advisor screens in control room, etc.).*

   a. ( ) **Storage Base (floor)** - *Inspect floors for cracks and gaps in the concrete or the concrete coating (Att 5, Table 5-8).*

   b. ( ) **General Area** - *Inspect the storage area for apparent spills or leaks from the containers (Att 5, Table 5-8).*

   c. ( ) **Number of containers in storage in the ECV** - *Ensure that the number of containers in storage does not exceed the limits specified below: (Att 12, Table 12-4)*

Munition/Bulk Container	Number in Storage	Maximum Number Allowed
155-mm Projectiles		156
Ton Containers		4
4.2" Mortars		180

   d. ( ) **Integrity of Containers** *(i.e., absence of deterioration, corrosion, released material, etc.) (Att 5, Table 5-8).*

   e. ( ) **Closed Containers** - *Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container (Att 5, Table 5-8).*

   Notes: 1. The required inspections for the material handling equipment and the sumps (ICUs) located in this room are addressed on other inspection logs located in Attachment 5.
   2. Mustard 155mm projectiles that have been rejected from the PMD back into the ECV solely due to a stuck burster do not have nose closures. In this case, the burster well continues to function as the container closure device that contains the liquid agent inside. Verification will consist of 1) the lack of visible leakage, and 2) the lack of an ECV ACAMS reading.

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

ENVIRONMENTAL INSPECTION LOG
FOR THE
UPMC CONTAINER STORAGE AREA

Weekly - Visual

a. **Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.** *Inspection to be performed by visual inspection (e.g., CCTV, advisor screens in control room, etc.).*

i. ( ) **Storage Base (floor)** - *Inspect floors for cracks and gaps in the concrete or the concrete coating (Att 5, Table 5-9).*

ii. ( ) **General Area** - *Inspect the storage area for apparent spills or leaks from the containers (Att 5, Table 5-8).*

iii. ( ) **Number of containers in storage in the UPMC** - *Ensure that the number of containers in storage does not exceed the limits specified below: (Att 12, Table 12-4).*

Munition/Bulk Container	Maximum Number Allowed	Number In Storage
155-mm Projectiles	1,004	
Ton Containers	19	
4.2" Mortars	1,957	

iv. ( ) **Integrity of Containers** *(i.e., absence of deterioration, corrosion, released material, etc.) (Att 5, Table 5-8).*

v. ( ) **Closed Containers** - *Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container (Att 5, Table 5-8).*

Note: The required inspections for the material handling equipment and the sumps (ICUs) located in this room are addressed on other inspection logs located in Attachment 5.

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
FOR THE
SECURITY FENCING

Weekly - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Security Fencing**
   Visually inspect the fences and gates surrounding TOCDF for integrity, sight obstructions caused by vegetation, and gaps at the fence base (Att 5, Table 5-28).

   b. ( ) **Security Lighting**
   Visually inspect the lights for proper operation (Att 5, Table 5-28).

   c. ( ) **Warning Signs**
   Visually inspect for the presence of all signs. Signs must be legible from a distance of 50 feet (Att 5, Table 5-28).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
FOR THE
SITE EVACUATION ALARM

Weekly - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Evacuation Siren** - *Verify operability of evacuation siren (Att 5, Table 5-28).*

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign	Date	Time

ENVIRONMENTAL INSPECTION LOG
FOR THE
AREA-10 IGLOO 1632 AND 1633 CONTAINER STORAGE AREAS &
SECONDARY CONTAINMENT SYSTEMS

Weekly - Physical

a. **Mark with an S any items found to be satisfactory. Mark with a U any items found to be unsatisfactory and describe unsatisfactory conditions in comments.**

Igloo Inspected ☐ 1632 ☐ 1633

i. ( ) **Volume of containers in storage** *(maximum allowed = 14,520 gallons in each igloo).*

ii. ( ) **Volume of containers per secondary containment pallet** *(The maximum combined liquid volume[1] of all containers on the SC pallet is 10-times the SC pallet's rated capacity [e.g., 600 total gallons on a 60-gallon SC pallet]).*

iii. ( ) **Volume of single largest container stored on a secondary containment pallet** *(The maximum volume of the single largest liquid container[1] on the SC pallet is the SC pallet's rated capacity [(e.g., 60 gallons on a 60-gallon SC pallet]).*

iv. ( ) **Segregation of Incompatible Wastes**

v. ( ) **Container Labels** - *Inspect all containers in storage to ensure they are correctly labeled.*

vi. ( ) **Material Handling Equipment** - *Observe material handling equipment during operation to determine any loss of performance.*

vii. ( ) **Integrity of Containers** *(i.e., absence of deterioration, corrosion, released material, etc.)*

viii. ( ) **Integrity of Secondary Containment Pallets** *(i.e., absence of deterioration, corrosion, released material, etc.)*

ix. ( ) **General Area** - *Inspect area for apparent spills or leaks from the containers or secondary containment pallets and for the accumulation of precipitation.*

x. ( ) **Closed Containers** - *Ensure that all containers covers/closure devices are secured in a closed position so that there are not visible holes, gaps or other open spaces into the interior of the container.*

b. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

Inspector Print / Sign _____ Date _____ Time _____

Note 1 - For the purposes of determining required secondary containment capacity, only the volume of an overpacked container needs to be considered, not the volume of the overpack itself as long as the overpack contains only the leaking container (e.g. a 55-gallon drum of liquid waste overpacked in an 85-gallon overpack contributes only 55- gallons to the required SC capacity).

MONTHLY
ENVIRONMENTAL INSPECTIONS

MONTHLY ENVIRONMENTAL INSPECTION LOG FOR 24-HOUR INTERMITTENT COLLECTION UNITS AND MDB RCRA PERMITTED SUMPS (CATEGORY A, B, AND A/B AREAS)

MONTH ENDING:_____

Location	Sump	Result (S or U)	Inspector Print and Sign	Date	Time
LIC1 Primary	SDS-PUMP-188				
LIC2 Primary	SDS-PUMP-157				

1. Inspection will be performed by removing the grating and with a flashlight, inspect for cracks, chips and deterioration of protective coatings, rusting and any signs of leaks. **If the inspection cannot be performed due to residues in the sump, the residues must be removed to complete the inspection** *(Per DSHW Letter, dated May 7, 2004).*
2. Physical visual inspection to determine if the liquid level in the sump corresponds with the alarm displayed on the advisor screen in the control room *(Att 5, Table 5-19).* **Mark with an S any items found to be satisfactory (i.e., those sumps where the liquid level corresponds to the alarm displayed on the advisor screen). Mark unsatisfactory items with a U and describe unsatisfactory conditions below.**

Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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ENVIRONMENTAL INSPECTION LOG
FOR THE
LIQUID INCINERATOR NO. 1 PRIMARY CHAMBER

Monthly - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. ( ) LIC1 **Primary Chamber Agent Feed Line** - *Inspect for leaks in the agent feed line at threaded and flanged pipe connections (Att 5, Table 5-11).*

   b. ( ) LIC1 **Primary Chamber** - *Inspect for fugitive emissions and hot spots on the outer shell of the primary chamber, which would indicate a breakdown of the chamber's refractory (Att 5, Table 5-11).*

   c. ( ) LIC1 **Primary Chamber Combustion Air Blowers** – *Evaluate Combustion Air Blower performance through Control Room Advisor Screen observations (Att 5, Table 5-11).*

   d. ( ) LIC1 **Primary Chamber Room Floor** - *Inspect for residues of lubricant and/or wastes beneath the components of the LIC agent feed system and the LIC exhaust gas ductwork (Att 5, Table 5-11).*

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

ENVIRONMENTAL INSPECTION LOG
FOR THE
LIQUID INCINERATOR NO. 2 PRIMARY CHAMBER

Monthly - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. ( ) LIC2 **Primary Chamber Agent Feed Line** - *Inspect for leaks in the agent feed line at threaded and flanged pipe connections (Att 5, Table 5-11).*

   b. ( ) LIC2 **Primary Chamber** - *Inspect for fugitive emissions and hot spots on the outer shell of the primary chamber, which would indicate a breakdown of the chamber's refractory (Att 5, Table 5-11).*

   c. ( ) LIC2 **Primary Chamber Combustion Air Blowers** - *Evaluate Combustion Air Blower performance through Control Room Advisor Screen observations (Att 5, Table 5-11).*

   d. ( ) LIC2 **Primary Chamber Room Floor** - *Inspect for residues of lubricant and/or wastes beneath the components of the LIC agent feed system and the LIC exhaust gas ductwork (Att 5, Table 5-11).*

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

ENVIRONMENTAL INSPECTION LOG
FOR THE
DEACTIVATION FURNACE

Monthly - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Combustion Air Blower** - *Evaluate combustion air blower performance through Control Room Advisor screen observations (Att 5, Table 5-14).*

   b. ( ) **Rotary Kiln** - *Inspect the rotary kiln for fugitive emissions (Att 5, Table 5-14).*

   c. ( ) **Rotary Kiln Drive** - *Inspect the rotary kiln trunnion rollers for smooth motion (Att 5, Table 5-14).*

   d. ( ) **Rotary Kiln Drive Lubrication System** - *Inspect the rotary kiln trunnion bearing lubrication system for leaks and spills (Att 5, Table 5-14).*

   e. ( ) **Heated Discharge Conveyor** - *Inspect the Heated Discharge Conveyor motion indicator plate for smooth even operation (Att 5, Table 5-14).*

   f. ( ) **Heated Discharge Conveyor (floor underneath)** - *Inspect the floor beneath the Heated Discharge Conveyor for residues of accumulated wastes (Att 5, Table 5-14).*

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

ENVIRONMENTAL INSPECTION LOG
FOR THE
METAL PARTS FURNACE

Monthly - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Waste Feed System** - *Inspect for movement of internal conveyor system from the control panel by ensuring conveyor drive chains are in motion (Att 5, Table 5-13).*

   b. ( ) **Combustion Air Blowers** - *Evaluate combustion air blower performance through Control Room Advisor Screen observations (Att 5, Table 5-13).*

   c. ( ) **Primary Chamber** - *Inspect for hot spots on the primary chamber outer shell, which indicate a breakdown of the incinerator's refractory (Att 5, Table 5-13).*

   d. ( ) **Afterburner** - *Inspect afterburner shell for hot spots, which would indicate a breakdown of the afterburner's refractory (Att 5, Table 5-13).*

   e. ( ) **Ductwork joining Primary Chamber and Afterburner** - *Inspect ductwork between primary chamber and afterburner for fugitive emissions (Att 5, Table 5-13).*

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

EMERGENCY RESPONSE EQUIPMENT INVENTORY LOG

Monthly - Physical

(Permit requirement found in Attachment 5, Table 5-27)

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

		ITEM	LOCATION
a.	( )	**HAZMAT Truck** *Parked in proper location, gas tank is more than half full, engine starts.*	Bldg S1
b.	( )	**Ton Container Repair Kit (1)** *Inspect kit seal to ensure that the contents of thekit are complete. If the seal is broken inspect contents of kit.*	MDB
c.	( )	**85 Gallon Overpacks (3)** *Inspect for sufficient quantity.*	Bldg S1/S4
d.	( )	**OSHA Level A Response Suits (12)** *Inspect for sufficient quantity and functionality.*	PMB TAP Room
e.	( )	**OSHA Saranex Suits (6)** *Inspect for sufficient quantity and functionality.*	PMB TAP Room
f.	( )	**OSHA Level C Response Suits (6)** *Inspect for sufficient quantity and functionality.*	HAZMAT Truck
g.	( )	**OSHA Overboots (6 pair)** *Inspect for sufficient quantity and functionality.*	HAZMAT Truck
h.	( )	**SCBA Packs with Bottles (6)** *Inspect for sufficient quantity and functionality.*	HAZMAT Truck
i.	( )	**Spare Air Pack Bottles (6)** *Inspect for sufficient quantity and functionality.*	HAZMAT Truck
j.	( )	**Particulate/Organic Vapor Cartridge Respirators (6)** *Inspect for sufficient quantity and functionality.*	HAZMAT Truck
k.	( )	**Non-Sparking Tool Kit (1)** *Inspect for completeness of kit.*	HAZMAT Truck
l.	( )	**Portable Eyewash (1)** *Inspect for functionality.*	PMB TAP Room
m.	( )	**Caustic Neutralizer (10 gallons)** *Inspect for sufficient quantity.*	Bldg S1/S5
n.	( )	**Acid Neutralizer (10 gallons)** *Inspect for sufficient quantity.*	Bldg S1/S5
o.	( )	**Shovels (5 each)** *Inspect for sufficient quantity.*	HAZMAT Truck
p.	( )	**Brooms (5 each)** *Inspect for sufficient quantity*	HAZMAT Truck /Bldg S5
q.	( )	**Absorbent (100 lbs)** *Inspect for sufficient quantity*	Bldg S1/S5
r.	( )	**Foot Baths (4)** *Inspect for sufficient quantity.*	DECON Trailer

s.	( )	**TAP Butyl M3 Coveralls or OSHA Level A Response Suits (6)** *Inspect for sufficient quantity and functionality.*	HAZMAT Truck
t.	( )	**TAP Butyl Hoods (6)** *Inspect for sufficient quantity and functionality.*	HAZMAT Truck
u.	( )	**TAP Butyl M2A1 Boots (6 pair)** *Inspect for sufficient quantity and functionality.*	HAZMAT Truck
v.	( )	**TAP Butyl M2 Gloves (6 pair)** *Inspect for sufficient quantity and functionality.*	HAZMAT Truck
w.	( )	**TAP Butyl M2 Aprons or OSHA Level C Coveralls (6)** *Inspect for sufficient quantity and functionality.*	HAZMAT Truck
x.	( )	**Agent Antidote Kits (6)** *Inspect for sufficient quantity.*	HAZMAT Truck
y.	( )	**Water for Decon (25 gallons)** *Inspect for sufficient quantity*	DECON Trailer

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign	Date	Time

Reserved

ENVIRONMENTAL INSPECTION LOG
FOR THE PROJECTILE/MORTAR DISASSEMBLY MACHINE
PERFORMED BY CONTROL ROOM OPERATOR

Monthly - Physical

1. **Mark with an S any items found to be satisfactory. Mark items found to be unsatisfactory with a U and describe unsatisfactory conditions in comments.**

   a. ( ) **Waste Feed System** ( ) ECR A ( ) ECR B
   Inspect the Projectile/Mortar Disassembly Machine within the ECR to ensure that no explosive residues or explosive munition components are collecting on the associated material handling equipment. Inspect for leaking hydraulic hoses/connections and accumulated residues of chemical agent (Att 5, Table 5-14).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign _____ Date _____ Time _____

PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
FOR THE
EMERGENCY GENERATORS
Monthly - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   NOTE: EGENS are tested monthly to ensure they are functioning properly and the equipment and systems designated as essential loads will continue to function if utility power is interrupted.

   a. **Emergency Generators** - *Test each Emergency Generator by operating in either a loaded or unloaded configuration (Att 5, Table 5-28).*

      ( ) **GEN-GENR-101**:

      Date_____
      Time_____
      Inspector Print / Sign_____

      ( ) **GEN-GENR-102**:

      Date_____
      Time_____
      Inspector Print / Sign_____

      ( ) **GEN-GENR-104**:

      Date_____
      Time_____
      Inspector Print / Sign_____

   b. **Uninterruptible Power Supply** (See completed PM work orders)
      Check for adequate voltage (Att 5, Table 5-28).

      ( ) **UPS-9101**:

      Date_____
      Time_____
      Inspector Print / Sign_____

      ( ) **UPS-9102**:

      Date_____
      Time_____
      Inspector Print / Sign_____

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

ENVIRONMENTAL INSPECTION LOG
FOR THE
BRINE REDUCTION AREA SURGE TANKS

Every Other Month - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. **Cathodic Protection**
   Inspect/Test sources of impressed current (Att 5, Table 5-23).

( )	( )	( )	( )
BRA-101	BRA-102	BRA-201	BRA-202

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign	Date	Time

QUARTERLY, SEMI ANNUAL, & ANNUAL INSPECTIONS

ENVIRONMENTAL INSPECTION LOG
FOR THE
SPENT DECON SYSTEM (SDS) ROOM

Annual - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. **Ultrasonic Thickness Testing**
   Inspect for corrosion (i.e. loss of shell thickness). If the measured wall thickness is less than or equal to 0.25 inches then the effected tank will be taken out of service until TOCDF and DSHW agree upon an appropriate course of action (Att 5, Table 5-22).

( )	( )	( )
SDS-101	SDS-102	SDS-103

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign	Date	Time

PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
FOR THE
FIRE PROTECTION SYSTEMS

Semi Annual and Annual Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

a. Fire Protection Systems (See subcontractor's inspection reports)

( ) **Halon System (Control Room)** – Semi Annual Inspection
Verify sufficient pressure in halon storage tanks (Att 5, Table 5-28).

( ) **FM-200/FE-227 (UPS/Battery Enclosures)** – Semi Annual Inspection
Verify sufficient pressure in FM-200/FE-227 storage tanks (Att 5, Table 5-28).

( ) **Dry Chemical Systems (Toxic Cubicle, Common PAS)**
(circle system found unsatisfactory) - Semi Annual Inspection
Verify sufficient pressure in nitrogen propellant tanks (Att 5, Table 5-28).

( ) **Automatic Sprinkler System (CHB, UPA)**
(circle system found unsatisfactory) - Annual Inspection
Verify sufficient flow rate of water at inspector's test connection (Att 5, Table 5-28).

( ) **Fire Hydrants** (See DCD fire department records) – Annual Inspection
Verify sufficient flow (Att 5, Table 5-28).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

PREPAREDNESS & PREVENTION READINESS INSPECTION LOG
FOR THE
EMERGENCY GENERATORS
Annual - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

Test Emergency Generators and Uninterruptible Power Supply by performing a power outage exercise. Ensure sufficient power is provided to equipment and systems designated as critical and essential loads. These tests may be scheduled events or may be unscheduled or naturally occurring events (e.g. power loss due to inclement weather, etc) (Att 5, 5.10.2.3).

a. **Emergency Generators**

( ) **GEN-GENR-101**:

Date_____
Time_____
Inspector Print / Sign_____

( ) **GEN-GENR-102**:

Date_____
Time_____
Inspector Print / Sign_____

( ) **GEN-GENR-104**:

Date_____
Time_____
Inspector Print / Sign_____

b. **Uninterruptible Power Supply**

( ) **UPS-9101**:

Date_____
Time_____
Inspector Print / Sign_____

( ) **UPS-9102**:

Date_____
Time_____
Inspector Print / Sign_____

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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ENVIRONMENTAL INSPECTION LOG
FOR THE
BRINE REDUCTION AREA SURGE TANKS

Annual - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. **Cathodic Protection**
   Confirm proper operation of the Cathodic Protection Systems (Att 5, Table 5-23).

( )	( )	( )	( )
BRA-101	BRA-102	BRA-201	BRA-202

   b. **Pipe Trench** ( )
   Visually inspect for presence of liquids in secondary containment system. Ensure that there are no cracks or gaps in the coating used to seal the secondary containment trench (Att 5, Table 5-23).

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign	Date	Time

ENVIRONMENTAL INSPECTION LOG
FOR THE
TOXIC CUBICLE TANK

Annual - Physical

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   Fixed Roof and Closure Devices
   Visually inspect to check for defects that could result in air pollutant emissions. Defects include, but are not limited to, visible cracks, holes or gaps in the roof sections or between the roof and the tank wall; broken, cracked, or otherwise damaged seals or gaskets on closure devices; and broken or missing hatches, access covers, caps, or other closure devices (Att 5, Table 5-21).

   ( ) ACS-101 ( ) ACS-102

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions associated with the above inspection criteria.**

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Inspector Print / Sign Date Time

ENVIRONMENTAL INSPECTIONS FOR INACTIVE SYSTEMS

Reserved

ENVIRONMENTAL INSPECTION LOG
FOR THE
DUNNAGE INCINERATOR
POLLUTION ABATEMENT SYSTEM

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

   a. ( ) Exhaust Gas Ductwork

   b. ( ) Afterburner

   c. ( ) Afterburner Combustion Air Blower

   d. ( ) Quench Tower and Associated Pumps/Piping

   e. ( ) Baghouse - differential pressure reading =
   Action Level: 0.0 inches WC

   f. ( ) Baghouse ash discharge area

   g. ( ) Induced Draft Fan

   h. ( ) DUN PAS Pad SUMP

   h. ( ) Exhaust Stack

2. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions.**

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_____ _____ _____
Inspector's Signature Date Time

Reserved

Reserved

ENVIRONMENTAL INSPECTION LOG
FOR THE
BRINE REDUCTION AREA
POLLUTION ABATEMENT SYSTEM

1. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

a.	( )	Knockout Box Manway Cover, Knife Gate, Flashing
b.	( )	Knockout Box Discharge Container & Transfer Hose
c.	( )	PAS Ductwork Flange Connections
d.	( )	Baghouse(s) Flashing, Access Door, Knife Gate
e.	( )	Baghouse(s) Discharge Container & Transfer Hose
f.	( )	Baghouse Pad Sump
g.	( )	Exhaust Stack Plume Opacity
h.	( )	Emergency Equipment
i.	( )	Spill Kit
j.	( )	Compliance Inst. Calibration
k.	( )	Baghouse(s) Differential Pressure Reading(s)

INSTRUMENT TAG ID	DIFFERENTIAL PRESSURE
PDI-143	
PDI-144	
PDI-145	
PDI-186	

Action Level for baghouse differential pressure low is: 1.0 inches WC
Action Level for baghouse differential pressure high is: 5.0 inches WC

2. Describe items marked unsatisfactory and corrective action taken (to include any work order number(s) generated to address items marked as unsatisfactory. **Document any abnormal conditions.**

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Inspector's Signature _____ Date _____ Time _____

Reserved

ENVIRONMENTAL INSPECTION LOG
FOR THE
SPENT DECON SYSTEM (SDS) *

Daily – Inside Toxic Area

1. **This inspection must be performed in person**.

2. **Mark with an S any items found to be satisfactory. Mark unsatisfactory items with a U and describe unsatisfactory conditions in comments.**

a.	Pipe System, Valves, Pumps	( ) SDS-101	( ) SDS-102	( ) SDS-103

*** Note: This inspection covers the piping system and valves used to transfer spent decontamination solution to the 90-day tank located in the PUB.**

3. Describe corrective actions taken, including any work orders (by number) generated to address conditions found to be unsatisfactory. **Document any abnormal conditions.**

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_____	_____	_____
Inspector Print / Sign	Date	Time